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CONFIRMATION NO. 3203

SERIAL NUMBER 10/729,757	FILING DATE 12/05/2003 RULE	CLASS 604	GROUP ART UNIT 3761	ATTORNEY DOCKET NO.
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APPLICANTS

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**** CONTINUING DATA *******

This application is a CIP of 10/314,825 12/09/2002 ABN
 and claims benefit of 60/515,718 10/30/2003
 and claims benefit of 60/515,775 10/30/2003
 and claims benefit of 60/515,793 10/30/2003
 and claims benefit of 60/515,794 10/30/2003

**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
 ** 03/23/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MI	SHEETS DRAWING 34	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 2
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35 USC 119 (a-d) conditions met
☐ yes ☒ no ☐ Met after Allowance

Verified and Acknowledged
 Examiner's Signature: *[Signature]* Initials: *[Initials]*

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TITLE
 Portable device for dispensing skin treatments

<input type="checkbox"/> All Fees
<input type="checkbox"/> 1.16 Fees (Filing)